

ADA COMPLAINT FORM

How can I file an ADA discrimination complaint?

Any person who believes that they has been discriminated against or denied full participation in transportation on the basis of disability by CTtransit may file an ADA complaint. ADA Complaints may be submitted to the ADA Complaint Officer by mail or by E-mail:

General Manager
100 Leibert Road
P.O. Box 66
Hartford, CT 06141-0066

E-mail: ADAComplaints@cttransit.com

Section I Contact Information

Complainant Name: _____

Street Address: _____

City, State, Zip: _____ Telephone Number: _____

E-mail : _____

Accessible Format Requirements? ☐ Large Print ☐ Audio Tape ☐ TDD ☐ Other

If other, please specify _____

Section II Third Party Completion

Are you filing this complaint on your own behalf?

☐ Yes ☐ No If you answered Yes, please proceed to Section III.

Please supply the name and relationship of the person for whom you are complaining: _____

Please explain why you have filed for a third party: _____

Please confirm that you have obtained the permission of the aggrieved party. ☐ Yes ☐ No

Section III Comment Details

Date of Occurrence: _____ Time of Occurrence: _____

Name/ID of Employee(s) or Others Involved: _____

If Name of employee is unknown please provide descriptive information to help identify employee(s): _____

Vehicle ID: _____

Route Name or Number: _____ Travel Direction: _____

Location of Incident: _____

Mobility Aid Used: _____

Explain as clearly as possible what happened, how you feel you were discriminated against and who was involved. Please include how other persons were treated differently from you: _____

Please provide the names, addresses, and telephone numbers of any witnesses.

Section IV Follow Up

May we contact if we need more details or information: ☐ Yes ☐ No

What is the best way to reach you (Choose one)? ☐ Phone ☐ Mail ☐ Email

If a call is preferred, what is the best day and time to reach you? _____

Once the investigation is completed what is the best way to provide you the response?

☐ Phone ☐ Mail ☐ Email

*You may use additional sheets of paper if necessary.
Please include any written materials pertaining to your complaint.*

Section V ADA Complaint Process

Complaints must be filed within 180 calendar days of the alleged incident. Upon receipt of an ADA complaint, *CTtransit* will review the submitted information within 15 business days and send the complainant an acknowledgement letter informing them whether or not the alleged discrimination is found to be a violation of ADA regulations.

If the alleged discrimination is found to violate ADA regulations, *CTtransit* will complete an investigation within 60 calendar days of receipt of the complaint. Once the investigator has reviewed a complaint, they will issue one of two letters to the complainant: 1) a closure letter or 2) a letter of finding (LOF). A closure letter summarizes the allegations stating that no ADA violation occurred and that the case will be closed. A LOF summarizes the allegations and the interviews concerning the alleged incident, and explains what, if any, corrective action, additional training of staff members, or other action will occur. If the complainant wishes to appeal *CTtransit's* decision, they will have 10 business days from the date of the letter to do so.

In addition to filing an ADA complaint with the *CTtransit*, an ADA complaint may also be filed directly with the Federal Transit Administration (FTA):

Federal Transit Administration
Office of Civil Rights
Attn: Complaint Team
East Building, 5th Floor – TCR
1200 New Jersey Avenue, SE
Washington, DC 20590

Section VI Record Retention

CTtransit will retain all ADA complaints for 3 years from the date the investigation was completed.